

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date:: 04/12/04

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?:: No

Number of copies of CRF:: 0

Title:: PREVENTION AND TREATMENT OF  
AMYLOIDOGENIC DISEASE

Attorney Docket Number:: 15270J-004773US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 18

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Dale  
Middle Name:: B.  
Family Name:: Schenk  
Name Suffix::  
City of Residence:: Burlingame  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1542 Los Altos Drive  
City of Mailing Address:: Burlingame  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94010

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Nicki  
Middle Name::  
Family Name:: Vasquez  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 310 Sanchez Street  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94114

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/580,015	05/26/2000
09/580,015	Continuation-in-part	09/322,289	05/28/1999
09/322,289	Continuation-in-part	09/201,430	11/30/1998
09/201,430	Application Claiming Benefit Under 35 U.S.C. Section 119(e)	60/080,970	04/07/1998
This Application	Continuation of	09/723,765	11/28/2000
09/723,765	Continuation of	09/580,019	05/26/2000

### **Assignee Information**

Assignee Name:: Neuralab Limited  
Street of mailing address:: 102 St. James Court  
City of mailing address:: Flatts, Smiths FL04  
State or Province of mailing address::  
Country of mailing address:: Bermuda  
Postal or Zip Code of mailing address::